

## Organizational aspects of Global Therapy

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In order to improve therapy, to design the best drugs is of course helpful. But!:

Imagine an elder patient who developed a breast cancer still without metastases. The sanitary system takes weeks to follow the standard protocol. The patient is first suggested hormone therapy. Unfortunately, she is unresponsive. The oncologic decision is then to undergo surgery, that would be quite resolute, at least for the next few years, unless the patient die under it, which would be sad, but probably not the worst

scenario. In the meanwhile, of such a month of protocol, the patient develops lymphatic first involvement. At this point, surgery will still probably used, but it will not be resolute, thus further implying a chemotherapy follow up, for the joy of pharma companies and maybe of physicians, and the suffering of the patients and her relatives.

My mother seems to be today in this very situation. Is it the best organizational mode we could expect as tax-payers?

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